

Hamlin Tool & Machine, Inc.
1671 East Hamlin Rd
Rochester, MI 48307

REMIT TO:
Hamlin Tool & Machine Company
1671 East Hamlin Rd
Rochester, MI 48307

INVOICE NUMBER
SID 064216

S GMC1200
O DELPHI SAGINAW
L
D NAO DISBURSEMENTS
INVOICELESS SUPERVISOR
PONTIAC, MI 48343-6040
T
O

S 05
H DELPHI S PLANT 5 FWD AXLES
I
P 3900 EAST HOLLAND RD.
CISCO: 44025 SAP#K905
SAGINAW, MI 48601
T United States
O

SUPPLIER CODE	TERMS		F.O.B.		INVOICE DATE	
057015273	2nd day 2nd month		ROCHESTER, MI		09/02/05	
SHIP DATE	SHIPPER NO.	SHIPPED VIA	GROSS		TARE	NET
09/02/05	064216	BAX GLOBAL	124		22	120
P.O. NUMBER	CUSTOMER PART NUMBER DESCRIPTION		QUANTITY SHIPPED	UOM	UNIT PRICE	AMOUNT
SAG90I0236	07834482 RETAINER, GREASE INTERNAL #: 1159		8,000	EA	.0535	\$428.00
						\$0.00
					Subtotal	\$428.00
					Sales Tax	\$0.00
					Freight Charges	\$0.00
					Invoice Total	\$428.00
					Disc Available	\$0.00
					Funds: USD	

1671 East Hamlin Road
Rochester, Michigan 48307
Phone: 248-651-6302
Fax: 248-651-0703
DUNS #057015273

Hamlin

Tool and Machine Company, Inc.
Established 1952

1200
GMACG-DELPHI SAGINAW
NAO DISBURSEMENTS
INVOICELESS SUPERVISOR
P.O. BOX 436040
PONTIAC, MI 483436040

005336878
DELPHI S PLANT 5 FWD AXLES
3900 HOLLAND RD.
CISCD: 44025 SAP#: K905
SAGINAW, MI 48601

DATE	INVOICE NO./ PACKING SLIP NO.
09/02/05	SID 64216
BILL OF LADING	
64216	

SUPPLIER NO. 057815273		SHIPPED VIA BAX GLOBAL		TERMS 25TH PROX		
OUR NO.	PURCHASE ORDER NO.	NO. OF PKGS.	PART NUMBER	QUANTITY SHIPPED	UNIT PRICE	AMOUNT
	ACCUM. SHIPPED	GROSS WGT.	DESCRIPTION			
1159	SA69010236 1014000	4 124	07834482 RETAINER, GREASE REV. 00 LOT 8E105 8000 PCS BOX# - CALL ALVAN FOR PICK UP 1-800-642-5826 PRICE EFF. 1/1/05-12/31/05	8000		
4-SC		124				
TOTAL NO. OF PACKAGES		TOTAL WEIGHT				
We hereby certify that these goods were produced in compliance with all applicable requirements of Section 6, 7, and 12 of the Fair Labor Standards Act, as amended, and of the regulations and orders of the United States Department of Labor issued under Section 14 thereof.						
NUMERICAL FILE COPY						

HFO-22 REV. LV/L: A 1/23/96

GLOBAL 440 EXCHANGE
IRVINE, CA 92602

DATE: 3/2/05 ORIGIN: DTW DESTINATION: DTW

SHIPPER'S REFERENCE NO. 257397452
SHIPPER'S ACCOUNT NO. 257397452
DEPT./FLOOR
COMPANY: HAMLIN TOOL & MACHINE
FROM (YOUR NAME):
STREET ADDRESS: 1671 HAMLIN RD
CITY: ROCHESTER STATE: MI ZIP (REQUIRED): 48067
PHONE NO.:

AIRBILL NUMBER: 701 725 275

CONSIGNEE'S REFERENCE NO. CONSIGNEE'S ACCOUNT NO.
COMPANY: Delphi Plant - East Windsor
DEPT./FLOOR:
TO (CONSIGNEE NAME): Plant 5
PHONE NO.:
ACCURATE STREET ADDRESS (BAX CANNOT DELIVER TO A P.O. BOX): 3926 Shuman Pkwy
CITY: Farmington STATE: MI ZIP (REQUIRED): 48430

BILLING INFORMATION
☐ PREPAID (SHIPPER) \$ CASH RECEIVED (PAID IN ADVANCE)
☐ COLLECT (CONSIGNEE) RATE QUOTE NUMBER
☐ 3RD PARTY (ACCT. NO. REQ'D.)
ACCOUNT NO. 6451939531
COMPANY/NAME:

HANDLING INFORMATION (*SPECIAL RATE MAY APPLY)
☐ HOLD AT BAX ☐ DANGEROUS GOODS ☐ SATURDAY DELIVERY ☐ SPECIAL DELIVERY ☐ CONVENTION
SPECIAL INSTRUCTIONS / ADDITIONAL REFERENCE INFORMATION:
RMK 1
RMK 2
NO. OF PCS. WEIGHT LENGTH WIDTH HEIGHT DESCRIPTION
NO. OF PIECES
TOTAL WGT. TOTAL REWEIGHT SKD(S) SAID TO CONTAIN 4 NO. OF PIECES
RELEASE SIGNATURE X (SENDER AUTHORIZES BAX TO DELIVER SHIPMENT WITHOUT A DELIVERY SIGNATURE AS PER CONDITIONS ON REVERSE OF THIS PAGE.)

GUARANTEED SERVICES
CALL YOUR LOCAL BAX STATION
☐ Guaranteed First Arrival (EMR 1)
☐ Guaranteed Overnight (EMR 2)
☐ Guaranteed Airport-to-Airport (EMR 3)
☐ Guaranteed 2nd Day (ER2 D)
STANDARD SERVICES
☐ OVERNIGHT (NEXT BUSINESS DAY)
☐ SECOND DAY
☒ BAX SAVER
☐ NEXT FLIGHT AVAILABLE
☐ OTHER

AIRBILL NUMBER: 701 725 275

DECLARED VALUE
\$
LIMIT OF LIABILITY: BAX GLOBAL WILL COLLECT CONSIGNEE'S CHECK MADE PAYABLE ONLY TO THE SHIPPER FOR THE VALUE OF THE GOODS IN THE AMOUNT SHOWN.

FOR BAX GLOBAL USE ONLY
RECEIVED BY BAX AT: ☐ SHIPPER'S DOOR ☐ BAX TERMINAL
OUTSIDE CARRIER: \$
CHARGES ADVANCED: \$
CARRIER NAME: PRO NUMBER:

I certify that this cargo does not contain any unauthorized explosives, incendiaries or hazardous materials. I am aware that this endorsement and original signature, along with other shipping documents, will be retained on file for at least thirty days.

SHIPPER / REPRESENTATIVE SIGNATURE: SIGN NAME X Robert Portney PRINT NAME X Robert Portney DATE 3/2/05

RECEIVED BY BAX GLOBAL DRIVER / AGENT
Driver Signature: [Signature]
Print Name: James Brown
Pick Up Date: 3/2/05 Time: 1:45 PM
Pick Up Location: Plant 5
Driver No.:

1st personal ID reviewed: ☐ # appearing on ID? ☐ YES ☐ NO
2nd personal ID reviewed: ☐ # appearing on ID? ☐ YES ☐ NO
Matched photo on ID? ☐ YES ☐ NO
Matched photo on ID? ☐ YES ☐ NO

(IN ORDER TO EXPEDITE, SHIPMENT MAY BE DIVERTED TO MOTOR OR OTHER CARRIER AS PER TARIFF RULE UNLESS SHIPPER GIVES OTHER INSTRUCTIONS HEREON.)
NON-NEGOTIABLE AIRBILL SUBJECT TO TERMS AND CONDITIONS OF CONTRACT ON REVERSE SIDE.

SHIPPER COPY

CARRIER: BAX GLOBAL BAXG CARRIER'S NO: SHIPPER'S NO:

From HAMLIN TOOL AND MACHINE COMPANY, INC.
At ROCHESTER, MICHIGAN 48307 D-U-N-S #057015273

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment. Shipper hereby certifies that he is familiar with all the terms and conditions of said bill of lading including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to DELPHI S PLANT 5 FWD AXLES (Mail or street address of consignee - For purposes of notification only)
3900 HOLLAND RD.
CISCO: 44025 SAP#: K905
SAGINAW, MI 48601

NO. PACKAGES	DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS	WEIGHT (SUBJECT TO CORRECTION)	CLASS RATE OR	CHECK COL.
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Supplier# 057015273 SID #

4 PCS71 CARTON 64216 120 NET WT.
4 TARE WT.
124 GROSS WT.

DELPHI S PLANT 5 FWD AXLES

===== T O T A L S =====
120 TOT NET 4 TOT TAR 124 TOT GRS

PCS71-4

CLASS RATE: 50 AUTOMOTIVE METAL PARTS
3RD PARTY COLLECT
BILL: DELPHI S, 44025 SAGINAW MI c/o
DATA 2 LOGISTICS P/O BOX 9115 NORWOOD, MA 02362

Trailer#: _____

ShipTime: _____

<small>Subject to Section 7 of conditions of applicable bill of lading. If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</small>	If charges are to be prepaid, write or stamp here, "To be Prepaid".	Received \$ _____ to apply in prepayment of the charges on the property described hereon.	Received \$ _____ to apply in prepayment of the charges on the property described hereon.	Charges advanced: \$ _____	C.O.D. SHIPMENT COD AMT _____ Collection Fee _____ Total Charges _____
		Agent or Cashier _____ Per _____ (The signature here acknowledges only the amount prepaid)	Agent or Cashier _____ Per _____ (The signature here acknowledges only the amounts prepaid.)		
THIS SHIPMENT IS CORRECTLY DESCRIBED. CORRECT WEIGHT IS _____ LBS.					

HAMLIN
TOOL AND MACHINE COMPANY, INC.
1671 EAST HAMLIN ROAD
ROCHESTER, MICHIGAN 48307

Shipper, Per

Agent, Per

Permanent post office address of shipper

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